AMENDMENTS TO THE CLAIMS

Claims:

1. (Cancelled)

2. (Cancelled)

3. (Cancelled)

4. (Cancelled)

5. (Cancelled)

6. (Cancelled)

7. (Cancelled)

8. (Cancelled)

9. (Cancelled)

10. (Cancelled)

11. (Cancelled)

12. (Cancelled)

13. (Cancelled)

14. (Cancelled)

15. (Cancelled)

16. (Cancelled)

17. (Cancelled)

18. (Cancelled)

19. (Cancelled)

20. (Cancelled)

21. (Currently Amended) A method of evaluating the needs of consumers

through uniform assessments and analyses, the method comprising the

steps of:

identifying a consumer's most serious problem by asking a first series of

uniform questions;

initiating a triage process by asking a second series of uniform questions;

generating at least one intervention recommendation based upon the

consumer's answers to the second <u>series of</u> uniform questions;

<u>gathering a consumer self assessment from said consumer, wherein said</u>

<u>consumer directly accesses the health care database to input</u>

<u>answers to the first and second series of uniform question;</u>

<u>generating a consumer self assessment score;</u>

scheduling appointments for the consumer to assess the severity of the

consumer's problems to determine a treatment plan to complete the

at least one intervention recommendation;

conducting professional assessment(s) to identify recommended treatment

for the consumer;

<u>asking the consumer a third series of questions, wherein said third series</u>

<u>of questions are specific to the identified problems of the</u>

<u>consumer;</u>

determining an assessment score for the problems identified~~, by asking a~~

~~third series of questions~~; and

generating an incremental record of activity that records the progress the

consumer has made during the appointments;

wherein said assessment score takes into consideration a consumer self

assessment score, a provider rating score, a standardized test score,

a learning strategy score, and a score based on subjective assessor

factors that influence training.

22. (Original) The method of claim 21, further comprising the step of

assessing the quality assurance of the at least one interventions by asking

the consumer a series of final uniform questions relating to the progress

and satisfaction of the consumer.

23. (Original) The method claim 22, wherein the consumer is visually

impaired.

24. (Currently Amended) A method of evaluating the needs of consumers

through uniform assessments and analyses, the method comprising the

steps of:

logging into a health care database system by a service provider staff

member;

meeting between the service provider staff member and a consumer;

determining if the consumer has previously been to the service provider;

reconciling said consumer's older records with newly collected

information;

registering a consumer by asking a first uniform series of questions;

skipping unnecessary first uniform questions using a skip pattern that

skips later questions depending on prior answers;

saving answers to the first series of uniform questions into the health care

database;

identifying a consumer's most serious problem from the consumer's

answers to the first series of uniform questions;

identifying if the consumer is in a crisis from the consumer's answers to

the first series of uniform questions;

identifying if the consumer is in an urgent situation from the consumer's

answers to the first series of uniform questions;

initiating a triage process by asking a second series of uniform questions;

skipping unnecessary second uniform questions using a skip pattern that

skips later questions depending on prior answers;

saving answers to the second series of uniform questions into the health

care database;

generating at least one intervention recommendation from the health care

database based upon the consumer's answers to the second

uniform questions;

conducting professional assessment(s) to identify recommended treatment

for the consumer;

setting up an appointment with the consumer to assess the identified

problems of the consumer;

asking a third series of questions, saving answers to the third series of

uniform questions into the health care database;

determining an assessment score for the problems identified, by asking a

~~third series of questions~~;

scheduling appointments for the consumer to assess the severity of the

consumer's problems to determine a treatment plan to complete the

at least one intervention recommendation;

generating an incremental record of activity recording the progress the

consumer has made during the appointments;

asking the consumer a final series of quality assurance questions relating

to determine the consumer's satisfaction with the outcome of the

treatment plan; and

assessing the quality ~~assurance~~ of the ~~at least one interventions~~ treatment

plans by asking the consumer a series of final uniform questions

relating to the progress and satisfaction of the consumer.

25. (New) A method of generating a treatment plan for a consumer,

implementing consistent protocols, the method comprising the steps of:

accessing a health care database by a staff member of a service provider;

meeting with a consumer;

gathering a demographic data from said consumer during a uniform

registration process;

identifying one or more needs and one or more services the consumer

requires by asking a series of standardized services questions

during the uniform registration process;

wherein said series of standardized services questions have one or more

skip patterns that activate to skip one or more later standardized

services questions, depending on one or more answers to one or

more earlier standardized services questions;

wherein said demographic data and one or more answers to said series of

standardized services questions of a returning consumer are saved

and combined with a previously saved consumer information data

set of said returning consumer in said health care database

wherein said demographic data and said one or more answers to said series

of standardized services questions of a new consumer new is saved

as a new consumer information data set;

asking said consumer a series of uniform triage questions related to a

health of the consumer during a triage process;

wherein one or more answers to said series of uniform triage questions

identifies one or more health related problems said consumer has,

and wherein said one or more answers to said series of uniform

triage questions identifies one or more functional problems said

consumer has;

wherein said series of uniform triage questions have one or more skip

patterns that activate to skip one or more later uniform triage

questions, depending on one or more answers to one or more

earlier triage questions;

asking said consumer a series of uniform assessment questions that are

related to said one or more health related problems and said one or

more functional problems of said consumer, during an assessment

process;

evaluating one or more answers to said series of uniform assessment

questions to determine one or more intervention recommendations

for each of the one or more health related problems and for each of

the one or more functional problems of said consumer during said

assessment process;

generating said one or more intervention recommendations during said

assessment process;

wherein said assessment process also includes the steps of, identifying the

effects of any field restrictions, identifying any concomitant

medical conditions, asking said consumer to demonstrate one or

more physical abilities related to said health related problems and

said one or more functional problems, and identifying any

medications said consumer is taking.

conducting one or more professional assessments to identify one or more

treatment recommendations for the consumer;

determining one or more initial assessment scores for each of said one or

more health related problems and said one or more functional

problems identified during said assessment process;

wherein said one or more assessment scores, including said one or more

initial assessment scores and one or more post assessment scores,

are the average of the sum of: a consumer self assessment score; a

provider rating score; a standardized test score; a learning strategy

score; and a subjective assessor factors, that influence treatment,

score; is converted to a one hundred point scale;

formulating one or more treatment plans for said consumer that

implements said one or more treatment recommendations;

recording an incremental record of activity that identifies a progress said

consumer makes in treating said one or more health related

problems and said one or more functional problems.

26. (New) The method of claim 25, further comprising:

asking said consumer a series of uniform quality assurance questions that

relate to a satisfaction of said consumer with an outcome of said

one or more treatment plans;

determining if said consumer was satisfied with said outcome of said one

or more treatment plans;

wherein said one or more answers to said series of uniform quality

assurance questions are utilized to assess a quality and an

effectiveness of said one or more treatment plans; and

27. (New) The method of claim 26, wherein said demographic data, said

answers to said series of uniform triage questions, and said answers to said

series of uniform assessment questions is collected by a staff member of a

service provider and entered into said health care database;

wherein said demographic data, said answers to said series of uniform

triage questions, and said answers to said series of uniform

assessment questions are directly entered into said health care

database by said consumer; and

wherein said consumer that enters said demographic data, said answers to

said series of uniform triage questions, and said answers to said

series of uniform assessment questions is blind or partially sighted.

28. (New) The method of claim 27, wherein said consumer self assessment

score is a sum of a consumer's self ratings to each of said series of

uniform triage questions and said series of uniform assessment questions;

wherein said provider rating score is a sum of a provider's rating to a

series of provider standardized questions;

wherein said standardized test score is one or more results of one or more

standardized tests;

wherein said learning strategy score is a sum of a provider determined

value in one or more learning strategy areas of visual,

visual/tactual/auditory, tactual/auditory, visual/tactual, and tactual;

and

wherein said subjective assessor factors, that influence treatment, score is

determined by evaluating how one or more subjective assessor

factors would influence treatment of said one or more health

related problems and said one or more functional problems of the

consumer.

29. (New) The method of claim 28, wherein said one or more health related

problems are related to a vision impairment of said consumer.

30. (New) The method of claim 29, wherein said one or more functional

problems are caused by said vision impairment of said consumer.

31. (New) The method of claim 30, further comprising:

determining whether said one or more answers to said series of uniform

triage questions prompt one or more initial assessment

recommendations from said health care database.

32. (New) The method of claim 31, further comprising:

asking said consumer to accept or reject said one or more initial

assessment recommendations.

33. (New) The method of claim 32, wherein said one or more professional

assessments take into consideration said one or more intervention

recommendations.

34. (New) The method of claim 33, wherein said one or more assessment

scores for each identified said one or more health related problems and

said one or more functional problems are utilized to determine said one or

more treatment plans.

35. (New) The method of claim 34, where in said one or more treatment plans address said one or more health related problems and said one or more functional problems and include one or more sets of goals to be achieved in a set time frame.

36. (New) The method of claim 35, wherein said one or more sets of goals are selected from the group consisting of sighted guide, indoor travel, ability to use emergency exit, orientation skills, stair usage, and local travel.

37. (New) The method of claim 36, wherein said one or more initial assessment scores determine a level of care associated with each of said one or more treatment plans.

38. (New) The method of claim 37, further comprising the steps of:

determining one or more post assessment scores; and

evaluating said progress of said consumer by comparing said one or more post assessment scores with said one or more initial assessment scores.

39. (New) The method of claim 38, wherein said incremental record of activity comprises a progress report section, a goal information section, and an objective information section.

40. (New) The method of claim 39, wherein a data is collected from multiple consumers to produce a cost/benefit analysis to determine if one or more treatments of consumer's problems reduce health care costs.

41. (New) The method of claim 40, wherein said one or more intervention

recommendations are selected from the group consisting of

psychotherapy, adjustment to vision losses, computer training,

employment services, help with living independently, social service, help

with improving orientation and mobility, and help with low or poor vision.

42. (New) The method of claim 41, further comprising:

determining if said consumer has previously received one or more past

treatments from said service provider, and wherein the purpose of

gathering said demographic data is to identify said consumer;

43. (New) The method of claim 42, further comprising the steps of:

scheduling an appointment to review said one or more health related

problems of said consumer and said one or more functional

problems of the consumer;

scheduling a triage appointment for the consumer during said uniform

registration process; and

scheduling an appointment to begin said one or more treatment plans.

44. (New) The method of claim 43, further comprising the steps of:

saving said one or more answers to said series of uniform triage questions

in said health care database;

saving said one or more answers to said series of uniform assessment

questions in said health care database; and

saving said one or more initial assessment scores in said health care

database.

CONCLUSION

In reviewing the additions and changes to the claims and specification, please note that these are submitted for the purposes of clarity and completeness and not to add any new matter to the patent application. Applicant respectfully requests reconsideration of the patent application in light of the foregoing and requests that all of Applicant's pending claims be allowed. The Examiner is invited to contact Applicant's undersigned counsel by e-mail (Marc@HankinPatentLaw.com) or by telephone at (310) 892-1613 to expedite the prosecution of this case should there be any unresolved matters remaining.

Dated: October 20, 2008   Respectfully Submitted,

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